ENTRY BLANK



PLEASE TYPE OR PRINT		Entered	Entered previous May Show			
☐ Ms. ► Mr. Artist	MES OF	yes HER	no (Last Name Last)			
Permanent Address Street	6 MAYFI	ap,	CLEV HTS.			
44/06 Zip						
Zip Temporary Address	Area Code		•			
Street			City			
	Tel. ()					
Zip	Area Code					
Permanent address is	in what county	CUYA	HOGA			
Born in Cuyahoga Co	ounty X Yes	□ No				
Collaborator(If A	Any)					
If May Show entries a Artist will pick u Museum should o	p at Museum. dispose of.					

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

ATTACHED

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until January 2, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry informat

Signature

ENTRY BLAN	IKS						
	7						
1. Paintings □ 2. Graphics □ 3. Photography 4. Sculpture □ 5. Electric □ 6. Crafts							
Medium or Materia	ls						
Ac	RY	LIC, CA	NV	45			
Title PAINT	-JN6	36A - P	LEA	SE MAKE	E IT TILL		
Price or NFS	Insurance Value If NFS Only			6×6×8			
GRAPHICS AND PHOTOGRAPHY ONLY							
Additional No. For	Sale	Total No. in Ed	ition	Price Unframed	Price of Frame		
DO NOT WI	RITE IN	THIS SECTION		ACCEPTED	REJECTED		
222		-(4)		555.0415	av.		
859		(1)	2	FEE PAID	BY LZ		
2 □ 1. Paintings □ 2. Graphics □ 3. Photography □ 4. Sculpture □ 5. Electric □ 6. Crafts							
Medium or Materia	ls	_					
Title	\						
Price or NFS Insurance Value If NFS Only							
GRAPHICS AND PHOTOGRAPHY ONLY							
Additional No. Fo	r Sale	Total No. in Ec	lition	Price Unframed	Price of Frame		
DO NOT WI	RITE IN	THIS SECTION		ACCEPTED	REJECTED		

1976 MAY SHOW

The Cleveland Museum of Art Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	JAMES OSHER	
Address	2756 MAYFIELD	
City & State	CLEV. HTS Zip 44	106

Dates for Pick-up of Objects

Museum Service Entrance 9:30 a.m. to 4:30 p.m., Monday through Saturday

Rejected Objects November 15 through November 27

Accepted Objects

January 10 through January 15

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

DO NOT DETACH



4. Sculpture 5. Electric 6. Crafts

🚺 1. Paintings 🗀 2. Graphics 🗀 3. Photography

ACRYLIC, CANVAS

PANTING 36A - PLEASE MAKE IT TILL YOU LIKE IT.

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

DO NOT DETACH



☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

□ 1. Paintings
□ 2. Graphics
□ 3. Photography

Medium or Materials

Title

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED